as the preeminent public policy research organization on issues affecting workers and their benefits.

EBRI has provided me with invaluable objective research, data, and analysis. The Institute is guided by the tenet that policy initiatives cannot "... be successful unless they are founded on sound, objective, relevant information." The information produced by EBRI covers health, retirement, among other economic issues, is thorough and comprehensive.

One of the most important reference materials to come out of EBRI is the Retirement Confidence Survey (RCS). The RCS is an important indicator of societal attitudes toward retirement planning and savings. While the House considers legislative measures, I find the issue briefs and research documents to be a valuable research and information tool.

As increased attention is paid by policy-makers, media, and the benefits community to the unique challenges facing minority groups, I think they are to be especially commended for including the RCS Minority Special Report. This report examines the attitudes of minority groups about preparing for retirement. Such an important effort shines a much-needed spotlight on a issue that is critical to the economic health and well-being of the African American community that is long overdue.

I know many members who are interested in these issues rely on EBRI to provide credible comprehensive data and analysis and use it to make informed decisions about policy initiatives and approaches.

Mr. Speaker, I wish Dallas Salisbury and EBRI continued success as they purse their quest for the facts.

HONORING JUDGE PHILIP PASTORE ON HIS 100TH BIRTHDAY

HON. ROSA L. DeLAURO

OF CONNECTICUT

IN THE HOUSE OF REPRESENTATIVES

Friday, September 25, 1998

Ms. DELAURO. Mr. Speaker, today marks the one hundredth anniversary of the birth of the Honorable Philip Pastore, a life-long New Haven resident who has served both the City of New Haven and the State of Connecticut with distinction throughout his law career.

Judge Pastore has dedicated his life to making our justice system work. In both his personal and professional life, he has earned a reputation for his fairness, integrity, and commitment to upholding and respecting the law. These qualities are demonstrated in the many judicial cases he has tried, presided over, and rendered judgments on for more than half a century. Judge Pastore retired only three years ago, leaving a legacy which included positions as a Democratic state representative and a Superior Court judge.

It is fascinating to listen to Judge Pastore's stories of the century of history he witnessed, along with the remarkable changes and tremendous progress to the judicial system. Although he no longer practices professionally, he continues to keep up-to-date on current case law, and his wife still reads the Connecticut Law Journal to him. Many seek his advice, knowing his counsel is offered with wisdom, justice and compassion. Plaques cover the walls of his home to honor the services he has

donated to the community. Indeed, his long career has left an indelible mark on the residents of Connecticut, and especially his close friends from the Wooster Street neighborhood. It is difficult to find someone whose commitment to excellence equals his own.

I join with his wife, Margaret, his children, grandchildren, and great grandchildren to honor Philip Pastore on his 100th birthday. Best wishes for continued fulfillment and happiness. Happy Birthday!

RECOGNIZING THE 100TH ANNIVER-SARY OF THE CRANBURY FIRE COMPANY

HON. MICHAEL PAPPAS

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Friday, September 25, 1998

Mr. PAPPAS. Mr. Speaker, I rise today to congratulate the Cranbury Fire Company as they celebrate 100 years of service to their community.

It is my privilege and honor to recognize this group of men and women who have protected the citizens of Cranbury and surrounding towns for the past century.

Since its formation in September 1898, members of the Cranbury Fire Company have placed their lives in harm's way in order to protect their fellow citizens.

We have relied on their selfless sacrifices and have always felt a strong sense of security knowing that they will respond to us when our lives, homes and neighborhoods are in peril.

Many times, we tend to take their services for granted and often do not acknowledge them for their hard work.

I hope that all Americans will reflect on the dedication of our firefighters whenever we pass by their town's firehouse or see a truck responding to an emergency call. We all must recognize the daily sacrifice of these brave men and women.

I extend my deepest appreciation and thanks to the Cranbury Fire Company for their efforts during the past century. It is my great pleasure to be able to recognize their work. Congratulations to all who have served in the company, those who presently serve and those who will carry on the Cranbury Fire Company's tradition of service into the new millennium.

A LIFETIME OF SERVICE—A TRIB-UTE TO REV. ROBERT L. BROWN OF ALBION, MICHIGAN

HON. NICK SMITH

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

Friday, September 25, 1998

Mr. SMITH of Michigan. Mr. Speaker, it is with great respect for his many years of service to the community and to his church as educator, counsellor, and administrator that I am proud to salute Rev. Robert L. Brown.

Rev. Brown served as pastor at the Gethsemane Temple Church of God in Christ for 11 years. Bishop Earl J. Wright appointed him Superintendent of the Albion District in 1985, overseeing several churches in the Albion area. He chairs the Elder's Council in the jurisdiction and is the Chairman of the Second Jurisdiction of Southwest Michigan Church of God in Christ. Inc.

As pastor of Grace Temple Church of God in Christ in Albion, Michigan, Rev. Brown has inspired many to become personally involved in doing God's work and making more gentle man's life on Earth. Led by his preaching and example, they in turn light the lives of even more people, even reaching as faraway as Port au Prince, Haiti—where their missionary ministry has built a church and a school to help others discover God's love.

He married missionary Lillie B. Kemp in December 1948 and they'll be celebrating their 50th anniversary this year. The Browns have five adult children and fifteen grandchildren.

In honoring Rev. Brown today, we honor the principles of virtue, moral courage, and sacrifice which he and others in the spirit of peace and the spirit of Christ have long espoused. As an inspiration, strength, and a blessing to those whose lives are touched by his, he helps others understand the place of faith in their lives and discover how to love God and one's fellow man.

Therefore, the Congress of the United States is proud to join with his lovely wife, fine family and his many admirers in extending highest praise and congratulations to Rev. Robert L. Brown.

NATIONAL BIPARTISAN COMMISSION ON THE FUTURE OF MEDICARE

HON. NANCY PELOSI

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Friday, September 25, 1998

Ms. PELOSI. Mr. Speaker, I submit the following testimony.

Thank you for the opportunity to provide testimony to the National Commission. Your work will have a profound impact on the health care of millions of Americans, and I encourage you to seek broad input from Medicare beneficiaries and providers around the country.

Medicare is one of our great success stories; it provides quality health insurance to 38 million Americans at a low administrative cost. Today Medicare is serving as a model provider of consumer protections. In the future, it can be the foundation for increased access to health care for all Americans.

Three months ago, I sponsored two town hall meetings on the future of Medicare in my home district of San Francisco. Hundreds of individuals came to share their thoughts and concerns about Medicare, and to talk about the important role the program plays in their lives.

The consensus in the San Francisco Bay Area was clearly for Medicare for all. Medicare must be preserved, improved and expanded for future generations. People who came to these meetings urged elected officials to protect the long term financial health of the program. But they also shared their visions of what Medicare can be—a more comprehensive program that better meets the needs of beneficiaries, and provides health insurance to many of those who have difficulty purchasing private insurance.

To design a Medicare program that improves services as well as meets the financial bottom line, we need to listen to people who are benefiting from Medicare now, and to

those who provide needed medical care through the program. So today I am submitting to the Commission the written comments we received at our town hall meetings. Let me briefly summarize these comments for you.

TESTIMONY AT TWO TOWN HALL MEETINGS

The point made most frequently in written comments was that Medicare should not impose stringent limits on home health care services. The logic of providing home health services is clear: seniors are happier and healthier if they can remain in their own homes, with some assistance, and sustain a level of independence. And increased institutionalization obviously means increased long term costs for the program.

Other frequent comments included the need to provide prescription drug coverage and long term care services through Medicare. One woman noted that, "Sometimes I have to do without a prescribed medication until I receive my Social Security check at the first of the month."

Others voiced their support for an expanded Medicare program in which millions more Americans are eligible for services. It is no secret that if younger and healthier individuals sign up for Medicare and pay premiums, the average cost per beneficiary will fall. Several people who filled out comment forms warned against efforts to privatize Medicare or compromise the program through Medicare savings accounts.

Others argued for including providing prevention, dental and vision services. The importance of these services requires no explanation. In an era when we are insisting all health care providers deliver more comprehensive prevention services, we should demand the same from Medicare. One woman suggested that Medicare require all HMOs to provide a toll free hotline to consumers.

COMMENTS FROM MEDICARE PROVIDERS

Medicare providers in my district also spoke at the town hall meetings about the challenges they face in providing care. The interim payment system for home health agencies has imposed a heavy financial burden on providers. Medicare providers have also supported legislative efforts to carve out disproportionate share hospital payments from payments to HMOs, eliminate the 100 bed requirement for qualification as a disproportionate share hospital, and repeal of the financial penalty for hospitals that transfer patients to other care settings before the DRG period has expired.

CONCERNS OF PEOPLE WITH AIDS

The AIDS epidemic has taken a devastating toll in my district, and Medicare plays a significant role in provision of health care to individuals affected by this epidemic. It is estimated that between 6% and 20% of people with HIV/AIDS rely on Medicare for some or all of their health care services. The Centers for Disease Control has estimated that between 10,565 and 22,927 Medicare beneficiaries are diagnosed with AIDS.

A recent report published by the Academy for Educational Development documents several concerns about HIV-related health care services under Medicare. First, because the program does not cover the costs of prescription drugs, beneficiaries are forced to find other means of acquiring the expensive but promising new drug treatments for HIV infection. These drugs can cost \$12,000 per year or more.

The report notes several other problems for people with HIV including, "the lack of guaranteed availability of individual supplemental insurance for the disabled under the age of 65, the lack of guaranteed availability of HIV specialists in Medicare managed care plans, the inadequacy of community-based

and home care services to address the ongoing chronic nature of the HIV disease process, and the limitations of the hospice benefit for addressing the acute treatment needs of people in the terminal stage of HIV disease." I am submitting a copy of this report with the town hall meeting testimony noted above.

RECOMMENDATIONS

A number of recommendations for reform of Medicare follow from the testimony and policy research presented above. Below is a list of recommendations. In some cases, I have noted legislation I have cosponsored that is consistent with these recommendations.

Expand sevices available in Medicare

Medicare should provide comprehensive and cost effective care to those who are eligible for the program. The program should provide reimbursement for needed drug therapies, long term care services, dental and vision care, and prevention services. The Medically Necessary Dental Care Act (H.R. 1288) would provide coverage for outpatient dental procedures.

Expand eligibility for Medicare

Medicare can serve as the foundation for increased access to health care for all Americans. I urge the Commission to identify ways in which eligibility for the program can be expanded. The Medicare Early Access Act (H.R. 3470) is consistent with this proposal. The bill would allow many of the "near elderly" to buy in to Medicare. We need to build upon this legislation to ensure that any buy in is affordable for all those who need health insurance coverage.

Address legitimate concerns of Medicare providers

The interim payment system for home health agencies threatens to put many providers out of business. Congress and the Commission must urgently address the need to develop a more equitable payment system for home health care. The Medicare Home Health Beneficiary Protection Act (H.R. 4339) places a moratorium on the interim payment system for home health care.

The Commission should also take steps to protect reimbursement to disproportionate share hospitals. H.R. 2701 would "carve out" disproportionate share hospital (DSH) payments from the payment we give HMOs.

In addition, the 100 bed requirement for qualification as a DSH should be repealed.

The disincentive for early hospital discharge should be eliminated. The Common Sense Hospital Payment Act (H.R. 2908) repeals the financial penalty for hospitals that transfer patients to other care settings before the DRG payment period has expired.

Address concerns of People with AIDS and other disabilities

As people with AIDS live longer lives, more will become eligible for Medicare. The Commission should make several changes in the program to address the needs of this growing population, including: guaranteed availability of supplemental Medicare insurance for disabled individuals; guaranteed access to an HIV expert as a primary care provider and for specialist services; and elimination of the limitation on hospice benefits that bars people from receiving some needed acute care treatments while in hospice care.

In addition, I encourage the Commission to study the interaction between Medicare, Medicaid, and Ryan White CARE program services, particularly in the provision of community based support services.

I look forward to working with the Commission to build a fiscally sound and expanded Medicare program. Thank you again for the opportunity to present these perspectives.

CONGRATULATIONS TO CALIFORNIA BAPTIST UNIVERSITY

HON. KEN CALVERT

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Friday, September 25, 1998

Mr. CALVERT. Mr. Speaker, today, after nearly a half-century as a member of California's higher education community, California Baptist College becomes California Baptist University. Cal Baptist, founded in 1950, was housed in a borrowed church building for its first four years, moved to its present Riverside location in 1954 and earned accreditation in 1961.

The college reaches this milestone under the leadership of Dr. Ronald L. Ellis, president since 1994. Former presidents are Dr. P. Boyd Smith, 1950–57; Dr. Loyed R. Simmons, 1958–69; Dr. James R. Staples, 1970–84; and Dr. Russell R. Tuck, 1984–94.

During the 1980's, the college was on the cutting edge of non-traditional education when it established the Business Executive program, the pre-cursor to the current Evening Degree-Completion program for working adults. In the mid-eighties, the college added its first post-graduate degree, a Master's degree in Counseling Psychology. Three years ago, the college added a Master of Education degree and, last year, the Master of Business Administration degree. From 1994 to 1997, the institutional enrollment increased 149 percent, much of it through graduate and Evening Degree-Completion programs.

California Baptist College has consistently produced well-schooled graduates. Scores of children in my district are the beneficiaries of that product as they thrive under the teaching of Cal Baptist alumni. The graduates of Cal Baptist's Master's degree program in Counseling Psychology have an unusually high pass rate on the state licensing exam. Cal Baptist alumni serve in the Riverside police department, city government, management in our local banking institutions, a broad array of social service agencies, and church-related positions on a global scale.

California Baptist College—now university—is in the business of preparing complete people, people who are equipped to make a difference. The university provides an environment that fosters not only intellectual development, but spiritual, emotional, physical, and character development. Students are involved in outreach to the homeless; tutoring programs at the county juvenile facility and Sherman Indian High School, a local Bureau of Indian Affairs boarding school; city clean up projects; and the City of Riverside's Study Circles on Race Relations.

The university adheres to a high ethical standard, the kind of standard to which our nation has traditionally aspired and which we continue to uphold as the mark of the truly successful. On behalf of the residents of the 43rd Congressional District, it is an honor to congratulate California Baptist University upon the occasion of their transition to university status